



NEW HAMPSHIRE MEDICAID PHARMACY PROGRAM

TO: NH Medicaid Pharmacy Providers	FROM: Rob Coppola Pharm D, MBA Account Director
SENDER'S PHONE: (603) 224 - 2083	SENDER'S FAX: (603) 224 - 6690
RE: Tamper Resistant Prescription Pads	DATE: 02/01/08

PHARMACY PROVIDER NOTICE

On April 1, 2008, a new federal law goes into effect requiring Medicaid covered outpatient prescriptions and over-the-counter drugs to be written on tamper resistant pads.

Effective for dates of service on and after April 1, 2008, a tamper resistant pad must include **ONE** of the following characteristics:

1. Prevent unauthorized copying of a completed or blank prescription form.
2. Prevent erasure or modification of information written on the prescription by the prescriber.
3. Prevent the use of counterfeit prescription forms.

Effective October 1, 2008 a prescription pad must contain all three of the above characteristics.

Please refer to the provider letter dated August 30, 2007 for additional information. This notice can also be found at: www.dhhs.state.nh.us

Please note the following claims submission requirement:

Effective April 1, 2008: The use of NCPDP field 419-DJ (Prescription Origin Code) will become mandatory and will no longer accept either a zero or null value in this field. Claims submitted with either a zero or null value in field 419-DJ will deny for missing or invalid prescription origin code, beginning on April 1, 2008.

Please use the NCPDP standard values of: 1= Written; 2= Telephone; 3 = Electronic; 4 = Facsimile.

This information will be used for auditing purposes. Thank you for assisting us in complying with this new Federal requirement.

If you have any questions please contact Rob Coppola at 603-224-2083.